

## Application Data Sheet

### **Application Information**

**Application Type::** Continuation-in-Part  
**Subject Matter::** Utility  
**Suggested classification::**  
**Suggested Group Art Unit::**  
**CD-ROM or CD-R?::** None  
**Computer Readable Form (CRF)?::** No  
**Title::** METHOD FOR THE PRODUCTION OF  
NATURAL BOTANICAL EXTRACTS  
**Attorney Docket Number::** 081583-0293  
**Request for Early Publication?::** No  
**Request for Non-Publication?::** No  
**Suggested Drawing Figure::**  
**Total Drawing Sheets::** 0  
**Small Entity?::** No  
**Petition included?::** No  
**Secrecy Order in Parent Appl.?::** No

### **Applicant Information**

**Applicant Authority Type::** Inventor  
**Primary Citizenship Country::** US  
**Status::** Full Capacity  
**Given Name::** Daniel D.  
**Family Name::** BARTNICK  
**City of Residence::** Indianapolis  
**State or Province of Residence::** Indiana  
**Country of Residence::** US  
**Street of mailing address::** 8127 Hoover Lane  
**City of mailing address::** Indianapolis

**State or Province of mailing address::** IN  
**Postal or Zip Code of mailing address::** 46260

**Applicant Authority Type::** Inventor  
**Primary Citizenship Country::** US  
**Status::** Full Capacity  
**Given Name::** Charles Mark  
**Family Name::** MOHLER  
**City of Residence::** Indianapolis  
**State or Province of Residence::** Indiana  
**Country of Residence::** US  
**Street of mailing address::** 6757 Oak Lake Drive  
**City of mailing address::** Indianapolis  
**State or Province of mailing address::** IN  
**Postal or Zip Code of mailing address::** 46214

**Applicant Authority Type::** Inventor  
**Primary Citizenship Country::** US  
**Status::** Full Capacity  
**Given Name::** Thomas H.  
**Family Name::** GIEL  
**City of Residence::** Carmel  
**State or Province of Residence::** Indiana  
**Country of Residence::** US  
**Street of mailing address::** 12928 Brighton Lane  
**City of mailing address::** Carmel  
**State or Province of mailing address::** IN

**Postal or Zip Code of mailing** 46032

**address::**

**Correspondence Information**

**Correspondence Customer Number::** 23524

**E-Mail address::** PTOMailMadison@Foley.com

**Representative Information**

<b>Representative Customer Number::</b>	23524	
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**Domestic Priority Information**

<b>Application::</b>	<b>Continuity Type::</b>	<b>Parent Application::</b>	<b>Parent Filing Date::</b>
This Application	Continuation-in-part of	10/706,309	11/12/2003
10/706,309	Continuation-in-part of	10/677,138	10/01/2003

**Foreign Priority Information**

<b>Country::</b>	<b>Application number::</b>	<b>Filing Date::</b>	<b>Priority Claimed::</b>

**Assignee Information**

**Assignee name::** Sensient Flavors Inc.